

BILL HULL MEMORIAL CUP

PURPOSE:

To honor the amateur gardener who is a member of TGOA/MGCA and has performed both long-term horticulture service to the residential community and long-term service to TGOA/MGCA on a national level.

NUMBER OF AWARDS:

One award may be given each year. The Memorial Cup is a traveling cup, being kept by the recipient for one year then returned to TGOA/MGCA; the recipient receives a plaque (the following year) certifying that he/she has been the recipient.

CRITERIA:

1. Be an amateur gardener and member of TGOA/MGCA. An amateur gardener is one who does not garden for a living.
2. Performed horticultural service to his/her residential community for a minimum of ten (10) years.
3. Performed long-term service to TGOA/MGCA on a national level for a minimum of ten (10) years.

PROCEDURE:

Packet of material consisting of:

1. Letter recommending the nominee listing in detail:
 - a. Horticultural services performed in their community for ten (10) years or more.
 - b. Is a member of TGOA/MGCA, stating number of years and activity of applicant during that time.
 - c. Listing of awards and honors received from the community, the club, region, TGOA/MGCA.
2. Copies of articles, pictures, and other supporting materials.
3. Three (3) letters of recommendation from individuals knowledgeable of the nominee's horticultural service in their residential community, and from individuals who are knowledgeable of the nominee's long-term service to TGOA/MGCA on a national level.
4. Name and address of local newspaper.

BILL HULL MEMORIAL CUP

Nominee _____

The following areas are to be evaluated on a 1-5 basis, with 5 being the highest rating.
The Awards Committee will make evaluations and return to the Chairman for tabulation.

	1	2	3	4	5
1. Amateur gardener (one who does not garden for living)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Member of TGOA/MGCA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Performed horticultural service in his community for ten or more years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Served TGOA/MGCA for ten or more years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Letter of nomination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Documentation of application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Letters of recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Documentation of service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Name and address of local newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TOTAL POINTS _____

COMMENTS: _____

(sign) Committee Member

Date